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Bib Data Sheet

CONFIRMATION NO. 4902

<b>SERIAL NUMBER</b> 10/041,946	<b>FILING OR 371(c) DATE</b> 01/07/2002 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3628	<b>ATTORNEY DOCKET NO.</b> C064
<b>APPLICANTS</b> James H. Wolfston JR., West Linn, OR; <b>** CONTINUING DATA *****</b> <i>None 0-0</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None 0-0</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 02/08/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>0-0</i> Acknowledged <i>0-0</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OR	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 34
<b>INDEPENDENT CLAIMS</b> 8				
<b>ADDRESS</b> 25784				
<b>TITLE</b> Coordination of independent billing and liquidity providers to facilitate electronic payments				
<b>FILING FEE RECEIVED</b> 771	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	